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A
TREATISE
ON
THE GOUT:
ITS
NATURE AND TREATMENT.

BEING THE SUBSTANCE OF A PAPER

READ BEFORE THE

MEDICAL SOCIETY OF GUY'S HOSPITAL,

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BY

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T R E A T I S E,
ETC., ETC.

THE Gout is a disease which, for centuries past, has attracted and received the particular attention of the most eminent of the Greek, Roman, and Arabian physicians; Hippocrates, Galen, Aretæus and Celsus treated of it; but the earliest author on the subject, whose physiological opinions are ingenious and philosophical, was Demetrius Pepagominos,* who dedicated his treatise to the Emperor Michael Paleölogos, who flourished about the year 1260; and this treatise was re-published by Morël, at Paris, in 1558.

Another able commentary on this subject was from the pen of Js. Thriverius, in 1532; since which period several hundred persons have written upon it. Indeed, every age and every nation has produced authors on this subject, who have expounded their various theories respecting, and have attempted to unravel the intricate problems of, this disease, the precise nature of which, however, still remains enveloped in considerable uncertainty; although, from the united endeavours of the

* See the Works of the Sydenham Society, Vol. II.

more modern authors, Vogel, Radolphus, and Bartholin, abroad; Cullen, Parr, Young, Good, Barlow, and Sir Charles Scudamore, at home, "the morbid relations and associations of the disease, and its various modifications," says Dr. Copland, "have been more fully elucidated, and its treatment assigned with much greater precision." But, as the middle ages, which witnessed the almost total decline of general literature, furnished several authors on this disease, and as it is no more possible for the spirit of philosophy to become extinguished than for the religious faculty to cease to operate upon the mind of man, let us hope that the increased intellectual faculties existing in the present age, and the great advantages derived from facility of investigation, may throw some new light on the true Nature, Cause, and Treatment, of this very painful disorder, which has been termed, by a celebrated modern author,* "the privilege of the rich;" and which was elegantly designated by Dr. Mead, "the offspring of luxury and intemperance."

It is not my intention, in the subsequent observations on the Gout, to quote largely from the opinions of the ancients, but more particularly to confine myself to those expressed by the authors of the day, most of whom use their own particular terms to designate the disease under consideration. Dr. Cullen, in a note appended to the article "Podagra," in his "Nosology," published in 1800, mentions, that "he rejected the term 'Arthritis,' so generally used by the French, as an ambiguous one; but, like the celebrated Boërhaave, adopted that of 'Podagra,' as denoting the chief type of the disease."

* Dr. Watson.

That indefatigable physician, Dr. Mason Good, defines the Gout thus:—"Pain, inflammation, and fulness, chiefly about the smaller joints, returning after intervals, often preceded by, or alternating with, unusual affections of the stomach, and other internal parts; unsuppurative."

All authors have described some symptoms which precede an attack of this disorder, generally referable to the digestive organs; but, nevertheless, the Gout sometimes occurs suddenly, and while the patient is in perfect health.

The first time a person is attacked with this disorder, he generally is so in the night, waking with an intolerable pain in the first joint, or the ball, of the great toe, which continues till a slight redness makes its appearance over the part; fever attends, and, on the occurrence of a slight diaphoresis, the person gets temporary relief, and sleeps; but, at night, being the time in which most distress is experienced in this disorder, the pain returns. Cramps and spasms occasionally occur, and the disorder perhaps attacks a small joint of the other limbs, or shows itself about the ankles, the knees, or the hands; on subsidence of the pain, there is swelling of the part affected, which continues for some time after the inflammation has subsided;—these symptoms constituting what has been termed by authors

ACUTE GOUT,

in which the urine is found loaded with acid, depositing a lateritious sediment, which Dr. Prout* considers the lithate of soda, and the tinging substance, purpurate of

* See Dr. P.'s Work on Diseases of the Urine, p. 123.

soda. Dr. Symon* considers the urine in Gout to consist of phosphate of soda, urea, uric acid, earthy phosphates, sulphate of potash, some solid constituents, and water.

For further particulars respecting the urine in Gout, I beg to refer to Dr. James Moore's description of gouty deposits, published in the first volume of the "Medico-Chirurgical Transactions." The pulse is high, according to the degree of the attendant fever; the tongue is furred; the skin sometimes hot, but occasionally moist; the perspiration being acid, and the surface of the body emitting an acid odour, which is accounted for by a famous physiologist,† who has ascertained that, by means of the skin, lactic acid, lactate of ammonia, and carbonic acid, are thrown off. In this form of the disorder there is great restlessness, much irritability of temper, with lowness of spirits, the general effects of which are to produce debility, and to derange the vital power in the digestive, biliary, and nervous organs. It is by no means necessary that a person who has acute Gout should suffer also from the chronic form of the disorder, as the following case will prove:—

Case.—A Mr. H——, residing in Lincoln's Inn Fields, came under my care in the year 1828, with an attack of acute Gout, which recurred at different intervals over a period of twelve years. This gentleman never suffered from chronic Gout, though he did, more than once, from the metastatic form of the disorder. The treatment adopted consisted of, in the first instance, calomel, followed by an aperient dose; subsequently, the combined alkaline remedies, both internally and

* See his *Animal Chemistry*.

† Müller. See his *Physiology*, by Dr. Baly.

topically, and to which I will hercafter revert. It is worthy of remark that this gentleman, being much engaged in the House of Commons as a Parliamentary Barrister, commenced, in 1839, the use of Colchicum; and I have little doubt that, eventually, he fell a victim to its effects, dying under the care of a medical gentleman in Herts, of inflammation of the mucous membranes, a year or two after the adoption of its use.

After the acute attack of Gout, a thickening of the ligaments perhaps takes place; the bursæ mucosæ becomes enlarged; the sheaths of the tendons become thickened, and effusion takes place into them, producing swellings, &c.;—these symptoms constitute what has been termed

CHRONIC GOUT,

in which the pains are more of a rheumatic character; there is an attendant chronic, dyspeptic cough; concretions occur in the cellular tissue adjacent to ligaments, and now and then in the joints themselves, producing great distress and inconvenience.* The following case will well illustrate this form of the disease:—

Case.—The late Lord W———d, who was attended by myself and Mr. Pennington for many years, was the subject of chronic Gout; he lived, however, to a great age, a martyr to dyspepsia, debility, and lameness, the repeated effects of the chronic state of the disease upon his constitution. He seldom had Gout in the acute form.

* Dr. Wollaston considers these chalk stones consist of uric acid and soda. Dr. Symon, of urate of soda, potash and lime, chlorate of sodium and animal matter. Dr. Watson, of lithic acid, combined with soda.

In both the acute and chronic form of Gout, it sometimes happens that some internal organ—the stomach, the bowels, or the brain itself—becomes suddenly and dangerously affected, the external disease disappearing; this is denominated

METASTATIC GOUT,

and is one of the most curious features of the disorder. It has been observed that, when metastasis takes place in the height of an acute paroxysm, the superinduced malady is likewise acute and rapid in its course, and *vicé versâ* when it occurs in the chronic form. The following case will illustrate this form of the disease:—

Case.—Colonel H. B——y, residing in Mortimer Street, Cavendish Square, who was under my care, with a slight attack of acute Gout, in the year 1829, went to the House of Commons, from whence he was conveyed home with agonising pain in the region of the stomach; his pulse was slow and feeble; skin cold; he had several rigours; and I soon discovered that, from the disappearance of the Gout in the foot, metastasis had occurred to the stomach. Stimulants, warmth, alkalies, and opiates were administered; the pain abated; a gentle diaphoresis occurred, and he fell asleep. On awaking, the Gout was found in the extremity, and the case became what it originally was—a slight attack of acute Gout. I sat up with this gentleman, and assiduously attended to the peculiar phenomena of the disease.

There is another mode in which the disorder shows itself in persons in whom the gouty diathesis exists; but where the constitution is too weak to develop the

local affections in the extremities, where we have those various and distressing disorders affecting the digestive apparatus, chiefly functional, causing great anxiety and suffering to the person ;—this state has been called

SUPPRESSED GOUT ;

to illustrate which I will relate the following

Case:—The late Sir B. B——, one of Her Majesty's Judges, was under my care from 1828 to 1843. He had occasional pains in the smaller joints of the hands and feet, but the acute pains and blush of genuine Gout was wanting. He occasionally passed calculi from the kidneys, had constantly a dull, aching pain in the loins, and many dyspeptic symptoms, all indicative of the want of capability in his constitution to throw out a fit of the Gout. Treatment, having this intention in view, was resorted to by myself and others, for years, but ineffectually. The Buxton, Bath, and German mineral waters were resorted to, but in vain. He died, last year, of acute bronchitis, at the age of seventy-four, without ever having had a perfect fit of the Gout, although he suffered occasionally from rheumatism.

There is one other peculiarity of this curious disorder, when a person, previously suffering from debility, associated with imperfect secretions and excretions, and, consequently, with redundancy of excrementitious matters, the ultimate product of assimilation in the circulation, and having previously been the subject of Gout, meets with an accident, such as fracture of a bone, or injury either to tendons or ligaments, the Gout occasionally follows such injury, generally proving fatal.

Case.—James Hadlee, ætat forty-eight, who had for

several years been the subject of the Gout, both in its acute and chronic form, fell from the top of a stage coach, in the city of Rochester, in the year 1824, and came under my care, with a compound fracture of the bones of the left leg, just above the ankle-joint; on the second day after the accident, the Gout showed itself in the foot, and the inflammation extended itself to the fracture. On the fourth or fifth day he sunk under the effects of the Gout, which was neither relieved, or lessened in violence, by the treatment adopted.

I will now examine the opinions of authors respecting the cause of this disease, all of whom concur in admitting an hereditary disposition, and a gouty diathesis.

Hippocrates ascribes the disease—to a corruption of blood and phlegm :

Van Helmont—to acidity in the circulation :

Sydenham—to a weakened concoction of the solids and fluids :

Berthollet—to an acid :

M. Bruissais*—To inflammatory action in the gastro-intestinal surfaces :

Dr. Sutton†—to a peculiar secretion in the intestinal surfaces :

Dr. Kentish‡—to a continued excess of food, conjoined to indolence :

Dr. Armstrong§—to inflammatory action in the gastro-intestinal canal :

Dr. Latham||—to inflammation :

* See Lectures, translated by Gully, 1843.

† Tracts on Gout, by T. Sutton, M.D.

‡ See Pamphlet, published in 1791, on Gout.

§ See Lectures by Dr. A.

|| See Dr. L.'s Letters.

Dr. Good*—to plethora, with entonic condition of the vessels :

Dr. Wollaston†—to a redundancy of uric acid in the blood :

M. M. Forbes‡—to a redundancy of acid :

Dr. Mackintosh§ regarded this disease as an inflammation of the affected part, produced by an effort of the constitution to remove disease from the internal parts to the surface :

Drs. Bateman and Barlow—to vascular plethora :

Dr. James Johnson||—to predisposition, plethora, and debility :

Dr. J. Copland¶—to functional disorders of the digestive organs :

Sir C. Scudamore**—to a redundancy of blood, chiefly affecting the circulation in the venæ portæ, in persons of predisposition, temperament, and diathesis.

I cannot help reverting to the very curious treatise before alluded to, written six hundred years ago, in which the author, Demetrius Pepagominos, considers that, “the Gout is occasioned by a collection of humours in the affected joint, these humours being the product of imperfect digestion, and of the retention of excrementitious superfluities which ought to have been evacuated from the system. The remote causes of gouty affections,” he says, “are long-continued indigestion, repletion with food, drinking too much

* Good’s Prac. Phys. Vol. II.

† See Philosophical Transactions, 1797.

‡ Treatise on Gravel and Gout. § Practice of Physic. Vol. II.

|| Practical Researchs on Gout, 1818. ¶ See Copland’s Prac. Med.

** See Treatise on Gout, 1823.

wine, venery, indolence, and retention of natural secretions."

How has this disorder been treated by the most eminent physicans?

Hippocrates purged the patient, and administered asses' milk; topically, he applied cold.

Celsus bled and recommended abstinence; topically, he applied cold.

Hoffman recommended abstinence only.

Aretæus recommended hot applications in the cold, and cold applications in the hot, stage.

Ruysch bled and purged.

Sydenham left the process of cure to nature, which he believed to take place by insensible perspiration; he gave aperients and opiates at night.

Dr. Mead bled and purged freely.

Dr. Latham employed the antiphlogistic plan.

Dr. Good used cold affusion.

Sir C. Scudamore uses bleeding, and aperients, and other medical remedies, combined with Colchicum, with a view to the radical treatment which aims at the removal of those obstructions and vitiated actions of the visceral organs, which are the great supporters of the disease.

Dr. Elliotson* recommends low diet and exercise; sherry, madeira, or beer, according to the habits of the patient; topically he uses leeches and tepid lotions, considering cold applications dangerous.

Dr. Copland recommends bleeding, purgatives, antimonials, Colchicum, &c., during the paroxysm; and

* See Dr. E.'s Lectures, *Medical Gazette*.

suitable medical regimen and treatment after it, promoting the secretions, and restoring nervous energy.

I do not consider it necessary, nor would it come within the limits of this paper, to notice all the empirical systems and remedies which have, from time to time, been brought forward for the treatment of this disorder; for it is absurd to suppose that any one particular medicine, or any single plan of treatment, can be adapted to every age, sex, and constitution; though I am ready to admit with Dr. Watson, "that, as the Gout is a disease of the rich, on that account it has probably given rise to more quackery and imposition than any other." I will, however, just glance at the present fashionable systematic treatments of the present day, viz. :—

HOMÆOPATHY AND HYDROPATHY.

In 1796, Dr. Samuel Hahnemann, of Leipsic, emitted his ideas on Homæopathy, and, according to M. Mare, it was treated in Germany with great contempt; for, so late as ten years ago, there were only three Homæopathists in Berlin; and, he adds, "one was a knave, and the other two ignoramuses." And M. Andral Pere considers the system to be "a piece of trickery, adorned with a high-sounding medical name."

The hospitals of France were thrown open to the followers of Hahnemann; but, as they failed in all their experiments, the wards were closed against them.

Hydropathy, or the use of cold water, internally as a beverage, externally as an application, combined with a peculiar diet, and its whole operation assisted by the

purest atmospheric air, is a very old remedy in the treatment of Gout.

Hippocrates, Celsus, Vander Haden, and others, recommended its use in the cure of this disease; and Dr. J. Bostock, on the 13th February, 1844, read two cases before the Royal Medico-Chirurgical Society, exemplifying the salutary effects of water-drinking in the cure of the Gout. The patients were above seventy years of age, and were subject from an early period to gouty attacks, having inherited a gouty diathesis; they were stated to be permanently relieved by the hydropathic treatment.

Sir C. Scudamore, who has recently visited Gräfenberg, considers Hydropathy a valuable addition to the resources of art in the treatment of this disease. The hydropathists, however, as mentioned by the Editor of the *Medical Gazette*, in a recent number, "seem still to be in the honeymoon of experience; they have not yet trodden the thorny paths of ordinary practice, when enthusiasm has fallen asleep, and patients are no longer docile." We must, therefore, adopt with caution a practice against which such eminent physicians as Cullen, Baillie, Saunders, Hooper, and Elliotson have registered their opinions as to its being "a dangerous treatment of Gout."

I have no experience of the efficacy of Homœopathy or Hydropathy in the treatment of the disease under consideration.

Specifics have been, and continue to be, sold for the cure of the Gout, from time immemorial. The most remarkable were—

The Hermodactylus of the ancients : *

Boërhaave's Cordial : †

The Portland Powder :

The Eau Medicinale d'Husson. ‡

To which I could add one thousand others, into the composition of all of which the *colchicum autumnale* enters, in some form or other.

The following appear to be the most remarkable facts appertaining to this disease :—

It is hereditary :

It does not occur till after puberty :

It attacks men oftener than women :

It seldom attacks those who live on vegetable diet :

It appears to exist in persons of a peculiar diathesis, which diathesis appears to be altered after every fit of the disease :

It is seldom fatal :

It is assimilated with rheumatism ; but the treatment which relieves the one does not cure the other :

The pain which characterises this disease is peculiar to the Gout :

It is not met with in every climate.

I will now state my own ideas of the disorder, and the treatment which, for a series of years, and in many instances, I have found most effectual. The hereditary peculiarity of the Gout I cannot explain, any more than I can account for the distinctness of the various species

* The Hermodactylus was supposed to be the *colchicum autumnale*.

† Rad-rhæi. Fol. sennæ. Spt. vin. ten. sem. coriand. and card.

‡ Two parts of expressed juice of colchicum, one part of brandy.

of the human race ; but why the disease should not occur till after puberty may admit of surmise, when we recollect that, by a law of nature, the food, by a series of changes in a living body, becomes, as it were, animalized, and rendered capable of renewing, by a peculiar and complicated process, both the solid and fluid parts of that body ; and, according to Müller,* “ each elementary particle of an organ of the body attracts similar particles from the blood, and, by the changes it produces in them, causes them to participate in the vital principle of the organ itself—nerves from nervous substance, and muscle from muscular substance ; when, therefore, man has arrived at that period when the development of organic structure is completed, then his intellectual capacity, his muscular power, and his organic functions, are called into habitual action—and accurately are all their purposes fulfilled, in the healthy state—but some accidental cause interferes with their regular and healthy performance, producing functional derangement.”

When we consider, therefore, that at puberty the growth of the body ceases ; that the elementary particles, for structural purposes, have ceased to be required ; and that the waste of the animal economy only is to be provided for—may not this functional derangement be consequent on a redundancy of material for the formation of the blood ? and may not that important fluid become vitiated, causing the disease under consideration, sooner or later, subsequently to puberty ?

We are aware that, on nutritive, healthy food, depends healthy chyle, and, on it, the quantity and quality of the

* See Müller's *Physiology*, by Dr. Baly, p. 361.

blood, "which," says Dr. Bostock,* "is a fluid, consisting of several ingredients, possessed of qualities peculiar to themselves, and existing in a state of combination of which we have no other example." For the particular analysis of this remarkable fluid, I must refer to the works of Parmentier, Deryseux, Fourcroy, Dclementheric; and to the more recent works of Birkbeck, M. L. Carnu, Marcet, M. Perrot, Vanquelin, and Dumas. The three latter authors state, "that the blood, in addition to the other substances which enter into its composition, contains a substance analogous to urea," which may be supposed to be formed as a useless compound of the superfluous elements in the conversion of the food into the essential components of blood; or, it may be an effete product of the change of material that is constantly taking place in the organised parts of the body.

Dr. Fletcher† estimates the quantity of blood in the human body at thirty pounds, and says: "the arterial system contains six, the venous twenty-four;" and he considers, at the same time, "there is twelve pounds of lymph and chyle in the lymphatic and chyloferous systems." The quantity of this fluid being so considerable, and never, when analysed, yielding the same results, and, as we know its constituent parts are changed by disease, I think we may safely infer, that all the secretions and excretions of the body may be influenced by its purity or impurity.

The blood of gouty individuals has been analysed by M. Symon, and others, and has been proved, beyond

* See *Med. Chirurg. Trans.* Vol. I., p. 47.

† See *Medico-Chirurgical Journal*, 1835, p. 8.

all doubt, to be altered in its character. It is not, however, yet known whether lithic acid exists in the blood, or is merely separated from it by the kidneys, or whether it is first formed in the urinary organs, although, under certain circumstances, it is deposited from the blood in different parts; for instance, in the neighbourhood of joints, forming gouty concretions.* Urea is not formed originally by the organs which secrete it—viz., the kidneys; for Prevost and Dumas have shown that it can be detected in the blood, when the kidneys have been extirpated; so that the reason this substance is not found in healthy blood is, that it is separated from it by the kidneys as fast as it can be formed.

Five ounces of the blood of a dog, which lived two days after the removal of its kidneys, afforded more than twenty grains of urea; and two ounces of cat's blood yielded nearly ten grains under similar circumstances. There can be no doubt of the accuracy of these experiments, for Vanquelin and Legalas have confirmed them.†

At the same time, the secretion from the kidneys differs from natural urine in the Gout, inasmuch as it contains urea and uric acid,‡ and its specific gravity varies from 1.022 to 1.025. The lungs throw off from the blood carbon,§ which, according to Prout, Liebig, and Wöhler, is one of the constituent parts of urea, the composition of which is—twenty carbon, six hydrogen, forty-six nitrogen, and twenty-six oxygen, in the 100 parts.

The saliva in the Gout is extremely viscid.

* See Müller's Elements of Physics, p. 151.

† Tiedman, in Treverance Zeitschrift, für phys.

‡ See Symon's Animal Chemistry. § See Müller's Phys., p. 160.

The excretions partake of the same acid character.

The concretions, which are secreted in a semifluid state, and afterwards become solid, consist of a peculiar acid, as before-mentioned,* united with alkalies.

It is worthy of remark that, when the attack of Gout ceases, no matter what treatment may have been adopted, or whether the cure had been spontaneous, the blood, secretions, and excretions become, generally, alkaline; the lithates cease to be secreted in the urine, but are now and then deposited in the alkaline concretions affecting the joints, or take the form of renal calculi.

I am not inclined to believe, however, that the cause of this disease is in the blood alone, but that it is engendered by, and dependant upon, unhealthy chyme, (which, according to Tiedemann and Gmelin, consists of albumen, which is proved to be excessive, or more abundant, when the person is fed on animal substances than when fed on vegetable substances; and Majendi states, "that it varies in colour, consistence, and appearance, with every change of diet,") and on consequent alteration of functions of the digestive organs, arising from a peculiar acid, developed, as Dr. Prout has observed, "during the mal-assimilation of the albuminos textures;" and I agree with Dr. Barlow in thinking, "that the complex conditions, and alleged varieties of Gout, are referable, not intrinsically to Gout, but to the state of constitution in which it occurs.

The treatment which I have been in the habit of adopting has been founded on my own opinion of the cause of the disease.

* See p. 7 of Paper on Gout.—H. H.

The mixed alkalies, occasionally combined with magnesia and henbane, are the remedies I have generally resorted to, and in frequently-repeated doses, having first cleansed the portal system and alimentary canal by means of a dose of calomel, followed by a brisk purge.

I have seldom had recourse to the use of Colchicum; when I have had recourse to its use, although I have observed a quicker cessation of pain, yet, I have uniformly remarked, that the patient has not recovered so perfectly as where the mixed alkaline treatment has been adopted, but that there has been a lingering debility, dyspepsia, and other distressing symptoms.

In the acute form of Gout, after having administered the calomel and aperient draught, I have generally commenced with the following, and repeated it every four hours:—

R Sodæ Sesquicarb. gr. xij.

Potas. Bicarbonat. gr. vj.

Mag. Sesquicarb. gr. v.

Tæ. Hyoscyam. m. xv.

Aq. Minth. Pip. q. s. ft. Haust.

Topically, I have used poultices of bran and hops, mixed with ʒ j. of the sesquicarbonates of soda and potash, and applied every four hours; or, I have directed the patient to put the part affected into a gallon of warm water, in which is previously dissolved half-an-ounce of carbonate of soda, and half-an-ounce of the bicarbonate of potash. I prohibited the use of acids, wines, and fermented liquors. Soda water, lime water, and milk, is the beverage I have been in the habit of recommending.

When the Gout had in some measure abated, I have commenced with the following remedy:—

R Infus. Serpentariæ, ʒ x. to ʒ iss.

Conf. Aromat. gr. x.

Liquor Potassæ m. xv.

Sodæ Sesquicarbon. gr. x. f. Haust.,

and given it three times a-day.

When the patient was convalescent, I have recommended change of air, and the use of the Cheltenham or Bath waters.

In the chronic form of the disease, I have generally given the following draught three times a-day, and with considerable advantage:—

R Potass. Bicarbon. ʒ j.

Aq. Cinnam. ʒ iss.

Conf. Aromat. ʒ j.

Spt. Ammon. Aromat. ʒ ß.

Sy. Aur. ʒ iss.

Tæ. Hyos. m. x. M. f. Haust.

The œdema I have treated by means of slight compression, or occasionally with the lin. sapon. c., or lin. camph. co., and slight friction.

I have never been called upon to treat gouty concretions; but, in one or two instances, the patients expressed themselves relieved by the alkaline poultices previously mentioned.

In suppressed Gout, I have endeavoured to strengthen the constitution, to improve the tone of the digestive organs, by tonics, and generous animal diet, and have directed those wines which have been observed to predispose to the Gout—for instance, champagne, claret, or port, and have recommended the Buxton waters. I am sorry to say I have more than once failed in producing a fit of the Gout, though the gouty diathesis was evident, but the constitution too weak to throw it out.

Colchicum has, I am aware, been much esteemed as a remedy in Gout; and, I believe, its power of arresting Gout, and checking the progress of sub-acute or gouty rheumatism, was originally established by Sir E. Home,* although it was known to the ancients. It was but little used till the year 1763, when it was introduced by a Mr. Want, in combination with saline medicines; and more recently extolled, as a sovereign remedy in Gout, by Sir C. Scudamore, Sir H. Halford, and others; but, for the reasons before stated, I prefer the mixed alkaline treatment, conjoined with henbane, believing that is a safer, and more permanent, mode of curing this disease.

The alkalies are known to exercise a chemical action on the blood, and increase the activity of the secreting and exhaling organs. It is, perhaps, curious to remark, that the mineral waters most celebrated for the amelioration or cure of the Gout, contain a very large proportion of the mixed alkalies and earths, which they imbibe, no doubt, from the peculiar strata of the earth through which they pass. For instance,—

The Bath waters pass through the lias clay, and oolite limestone:

The Buxton, through the calcareous hills, and limestone:

Whilst the Cheltenham and Leamington waters are derived from similar sources.

It may, probably, be considered presumptuous in me to have made the foregoing observations on the Nature and Treatment of the Gout, after the numerous and able works that have already been referred to on the subject; but I trust that continued observation, combined with

* See Good's Prac. Physic. Vol. II., p. 533.

long professional experience, will prevent my being numbered amongst those who, according to my late friend, Mr. King, "are declared to have toleration in England, the hot-bed of empiricism; to have full scope and acts of grace, latent and patent; and who are cherished and nourished with the perpetual sunshine of public favour;" but that I may be allowed to take my position amongst those who, Dr. Reid says, "are always impressed with a due sense of the limited extent of their powers, and of the innumerable fallacies to which they are exposed on all sides, but who, guarding against the errors of rash and superficial indication, keep their minds always open to conviction."

